



Snohomish County Medical Examiner

Personnel and Other General Policies and Procedures

This manual contains Personnel and Other General Policies and Procedures of the Snohomish County Medical Examiner's Office and supersedes all previous information relating to:

Personnel and Other General Policies and Procedure

This Manual shall be effective on April 13, 2011 and will remain in effect until suspended by written directive.

Norman Thiersch, M.D., Chief Medical Examiner

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SECTION 1.0

Personnel and Staffing

1.1 Policy

It is the policy of the SCMEO to adhere to the currently adopted Master Agreement between Snohomish County and the Washington State Council of County and City employees AFSCME/AFL-CIO, the Medical Examiner's Addendum to the Master Agreement, and the Snohomish County Code, Personnel Rules in Title 3A.

1.2 Snohomish County New Employee Orientation

At Human Resource's [new employees' orientation](#), each employee is introduced to the Snohomish County Code, the Union Agreement and Title 3A (Personnel Rules) of the County Code. New employees are told that it is important to familiarize themselves with the personnel rules, and provided a "Personnel Rules and Executive Orders" guide sheet that explains that this information is available to them on Emweb or the G-drive as follows:

- Snohomish County Code Title 3A – Personnel Rules: classification, pay administration, benefits, probationary period, etc.
- Snohomish County Code 2.50 – Code of Ethics: guide to professional conduct
- Snohomish County Code Chapter 3.57 – Affirmative Action: information regarding equal opportunity employment

The guide sheet tells new employees to go to G:\Executive\Orders for access Executive Orders and other specified documents:

- Executive Order [05-11A](#) – Standards of Ethical Conduct: guide to professional conduct for appointed officials and employees
- Executive Order [93-09](#) – Policy Reporting Improper Governmental Action: Local Government Employee Whistleblower Protection Act
- Executive Order [08-02C](#) (02/04/08) – Equipment Use Policy

New employees are also provided with the Human Resource Department's web site location to access the links for this information:

http://www1.co.snohomish.wa.us/Departments/Human_Resources/New_Employees/

http://www1.co.snohomish.wa.us/Departments/Human_Resources/New_Employees/laborrelations.htm

1.3 SCMEO New Employee Orientation

Each new employee shall be provided information on the SCMEO written policies, including where both the hard copy (in the library) and the digital copy which are available for their access and review. [NAME G1(c) Personnel; NAME A4(c) Safety]

1.4 Procedures for Corrective Action

The SCMEO adheres to the procedures for corrective action as set forth in the Snohomish County and the Washington State Council of County and City employees AFSCME/AFL-CIO and the Snohomish County Personnel rules in Title 3A. [NAME G1(d) Personnel]

1.5 Procedures for Discipline and Termination of Staff

The SCMEO adheres to the discipline and termination procedures as set forth in the Master Agreement between Snohomish County and the Washington State Council of County and City employees AFSCME/AFL-CIO, Article 23 and the Snohomish County Personnel rules in Chapter 3A.12. A grievance process is provided by the Master Agreement as to whether or not such action was for cause. [NAME G1(d) Personnel]

1.6 Procedures of Request and Review of Leave

Employee leave shall be requested and pre-approved in writing using the Snohomish County Absence Request form. Vacation, compensatory leave and floating holiday requests should be made sufficiently in advance to allow for workload coverage, shift adjustments to ensure 24/7 coverage in Investigations, and to not impair the efficiency of the office.

- 1.6.1 [Overtime](#) must be pre-approved by the supervisor. Accrual of compensatory time off must be requested and pre-approved in writing prior to working the extra hours, and compensatory time should be used as soon as operations permit. (updated 2/2/12)
- 1.6.2 Sick leave notice must be provided by the employee to his/her supervisor, prior to the start of the shift. If the supervisor is unavailable the employee shall leave a message on the supervisor's voice mail, and in this situation a courtesy notice provided by the employee to the on-duty investigator is also appreciated.
- 1.6.3 One floating holiday per year may be used for emergency leave. Notice of absence for sick leave or for emergency use of the floating holiday must be provided by the employee to his/her supervisor, prior to the start of the shift. If the supervisor is unavailable the employee shall leave a message on the supervisor's voice mail, and in this situation a courtesy notice provided by the employee to the on-duty investigator is also appreciated.

1.7 Management of Leave Time

Failure to provide advance notice of an absence according to the provisions above may result in unauthorized leave without pay, unless the employee is excused from such notification for extenuating circumstances that prevented the opportunity to notify and notification was made as soon as possible.

Sick leave and vacation leave are accrued in separate leave banks for different uses. Employees have the responsibility to track their leave usage and accruals accordingly. Absence beyond the banked accrual may result in unpaid leave.

1.8 Conflict of Interest

SCMEO staff shall adhere to the Executive Order 05-11A standards and guidelines for ethical conduct and principles for public service, to protect against actual and potential conflicts of interest, and to strengthen public confidence in the integrity of the office and Snohomish County government. Each SCMEO employee shall notify their supervisor of any conflict of interest that may exist or appear to exist. Examples include conflicting employment, personal benefit resulting from SCMEO employment, the death of a family member under jurisdiction of the SCMEO, or a death under jurisdiction of the SCMEO in which a family member was involved.

1.8.1 Approval – Secondary Employment

An employee shall have approval of the Chief Medical Examiner, or designee, before beginning any secondary employment. Approval of secondary employment may be withdrawn at any time if it is determined that secondary employment has an adverse impact on primary employment. Secondary employment shall not be permitted when it would:

- 1.8.1.1** create either directly or indirectly a conflict of interest with the primary employment;
- 1.8.1.2** impair in any way the employee's ability to perform all expected duties, to make decisions and carry out in an objective fashion the responsibilities of the employee's position.

1.8.2 Leave – Secondary Employment

Employees may not engage in secondary employment during any period while on sick leave, disability leave, and/or FMLA if the employment can be reasonably construed to delay or preclude full recovery and return to work.

1.8.3 Equipment and Authority – Secondary Employment

Employees will not use any SCMEO equipment or exercise any SCMEO authority while engaged in any secondary employment.

SECTION 2.0

Snohomish County Medical Examiner's Office Equal Employment Opportunity Policy and Implementation Plan

2.1 Policy

It is the policy of the Snohomish County Medical Examiner's Office to pursue equal employment opportunity regardless of race, color, sex, religion, marital status, national origin, age, sexual orientation, citizenship, veteran status, or the presence of any sensory, mental, or physical disability as defined by federal, state, and local law in our relationship with applicants for employment, employees of the department, and the public.

2.2 Dissemination and Communication

This policy will be disseminated to department employees as an inclusion in the employee policy and procedure manual and communicated during staff meetings and new employee orientation.

2.3 Responsibilities

2.3.1 Implementation

The Medical Examiner's Office, through the Operations Manager, shall implement this Equal Employment Opportunity ("EEO") Policy and Plan pursuant to Snohomish County Code ("SCC") 3.57 and in coordination with the County Executive's EEO Plan, as adopted by the County Council. The Medical Examiner Office's policy and implementation plan will be submitted to the County's EEO Investigator and Human Resources Department for review and comment. The plan shall be consistent with all applicable laws.

The Operations Manager shall further monitor all departmental matters concerning equal employment opportunity and report directly to the director of his or her department on the same, pursuant to SCC 3.57.

2.3.2 Operations Manager of the Medical Examiner's Office

The Operations Manager maintains responsibility for assuring that recruitment for departmental vacancies is handled in such a manner as to attract a qualified, diverse applicant pool and that hiring decisions are based on non-discriminatory, job-related factors. The Operations Manager is responsible for making reasonable efforts to assure that all employees are provided a work environment that allows every employee the equal opportunity to succeed. Employees shall be treated in a non-

discriminatory manner, consistent with applicable laws, rules, regulations, and policies.

2.3.3 Administration of EEO Activities

The Operations Manager is responsible for administering the implementation of EEO activities consistent with the plan. Overall EEO responsibilities shall be coordinated with the County's EEO Investigator and Human Resources Department.

Activities in this area may include:

- a. Consulting with the Human Resources Department and the County's EEO Investigator to identify under-represented EEO job categories.
- b. Promptly investigating alleged violations of County EEO policies in coordination with the County's EEO Investigator.
- c. Implementing EEO policies through internal and external communication techniques.
- d. Analyzing employment practices, including reassignments and promotions, and programs offered to employees, including training and other professional development activities to ensure that such activities occur in a non-discriminatory manner.

2.4 Employment Practices

2.4.1 Recruitment

Qualified applicants who reflect the diversity of all such persons in the relevant labor market will be sought. All employees involved in the recruitment, screening, and selection processes will be properly trained to ensure the elimination and absence of bias in all personnel actions. Recruitment of applicants to assure equal opportunity may include the following:

- a. Projection of expected hiring opportunities in the coming twelve months to identify opportunities for equal employment opportunity.
- b. EEO planning with hiring goals set by gender and race/ethnicity.
- c. Utilization of the "Candidate Sourcing Guide" and "Diversity Toolkit Recruitment Guidelines," found in the "Diversity Toolkit."
- d. Posting of vacancies, utilizing the format and EEO language developed by the Human Resources Department, both internally and externally, including targeted newspapers, trade, professional journals, and associations.

2.4.2 Hiring

The Snohomish County Medical Examiner's Office will make non-discriminatory hiring decisions based upon an evaluation of its workforce needs and evaluation of an applicant's qualifications and ability to satisfactorily perform the essential functions of the position, with or without accommodation, consistent with applicable law, rules, regulations.

2.5 Reporting Of EEO Efforts**2.5.1 Selection Process**

The Snohomish County Medical Examiner's Office records documenting its EEO outreach and recruitment efforts are recorded in NeoGov.

2.5.2 Employee Relations and Development

The Snohomish County Medical Examiner's Office will continue to work on:

- a. Applying consistent non-discriminatory standards when assigning or authorizing staff training and professional development;
- b. Applying consistent non-discriminatory standards when preparing and issuing performance evaluations, performance coaching and counseling, and when investigating and issuing disciplinary actions;
- c. Building a more inclusive work environment that values diversity, fosters creativity, and ensures the dignity, respect and worth of every employee through written and spoken communications;
- d. Maintaining mutual accountability to the MEO team agreement.

SECTION 3.0

Professional Considerations: Credentials, Privileges Continuing Medical Education and Staff Training

3.1 Professional Credentials and Privileges

- 3.1.1 The licensure of the medical staff is verified at the time of the initial employment. [NAME G6(a) Professional Credentials and Privileges]
- 3.1.2 The Chief Medical Examiner will evaluate the performance of the Associate Medical Examiner at least once a year.

3.2 Staffing Training and Continuing Education

- 3.2.1 Each licensed physician is required to and given the time to participate in continuing education. Sufficient funding is available for this office approved and professionally-required training.
- 3.2.2 The medical staff participates in external continuing medical education training. All members of the staff are encouraged to participate.
- 3.2.3 Continuing education is available to all investigators. Investigators are encouraged to complete continuing ABMDI accepted training courses that are available on the internet on paid time as time allows. Reasonable efforts will be made to distribute available training funds as equitably as possible to ensure all personnel who are tasked with medicolegal death investigation duties are trained, knowledgeable and proficient in the performance of their duties to the standards of ABMDI.
- 3.2.4 All operators of radiologic equipment will be trained at least once a year. See also [Safety Policies and Procedures](#), 1.9 Training.
- 3.2.5 All staff members who work in the autopsy area will receive annual formalin safety, blood borne pathogens and personal protective equipment training. See also [Safety Policies and Procedures](#), 1.9 Training.
- 3.2.6 All staff members that perform duties in a training capacity will be supervised and monitored by a qualified practitioner.

3.3 Performance Evaluation and Monitoring

- 3.3.1 Staff sign-out conferences are scheduled weekly to discuss pending and problem cases.
- 3.3.2 Autopsies are reviewed on a periodic basis. See the Quality Assurance subsection 4.0 (below).
- 3.4 Employee performance evaluations for professional and regular staff shall be conducted at least once per year and shall be based upon the standards related to the employee's work assignment.

3.5 Professional Staff – Medical Examiners

- 3.5.1** The department shall be managed and administered by a fulltime Chief Medical Examiner. (Snohomish County Code 2.74.010)[NAME G2(c) Professional Staff – Medical Examiners]
- 3.5.2** As defined in Snohomish County Code 2.74.060, the Chief Medical Examiner's primary functions include the oversight of death investigation in Snohomish County and the administration of the Medical Examiner office. [NAME G2(c) Professional Staff – Medical Examiners]
- 3.5.3** The Chief Medical Examiner will possess board certifications in Anatomic Pathology as well as Forensic Pathology; will be licensed to practice medicine in the state of Washington; and will have at least two years of forensic pathology work experience. Board certification is granted by the American Board of Pathology. (Snohomish County Code 2.74.050) [NAME G2(a)(b)(k) Professional Staff – Medical Examiners]
- 3.5.4** The Associate Medical Examiner will possess similar qualifications as the Chief Medical Examiner. These will include board certification in Anatomic and Forensic Pathology, and a license to practice medicine in the state of Washington.
 - 3.5.4.1** If the Associate Medical Examiner is not board certified in Anatomic and Forensic pathology upon hire, he/she will become certified within two years of their hire date.
 - 3.5.4.2** Failure to achieve board certification will be grounds for termination of employment.
- 3.5.5** The Associate Medical Examiner's primary function will be to oversee the pathology division within the Medical Examiner Office, including supervision of the autopsy assistants. In addition, the Associate Medical Examiner will oversee and provide direction to the investigative and administrative staff as might become necessary. [NAME G2(f)(g)(h) Professional Staff – Medical Examiners]
- 3.5.6** The Associate Medical Examiner may be asked to serve as the Chief Medical Examiner in the Chief Medical Examiner's absence. [NAME G2(d)(e)(k) Professional Staff – Medical Examiners]
- 3.5.7** Licensures are validated annually.
- 3.5.8** The medical staff is of sufficient size so that no forensic pathologist has to perform more than 250 autopsies per year. [NAME G2(i)(j) Professional Staff – Medical Examiners]

SECTION 4.0

Quality Assurance

4.1 Definition

Quality assurance is the process of verifying or determining whether products or services meet or exceed established standards.

4.2 Policy

It is the policy of the Snohomish County Medical Examiner's Office that all work products, reports, photographs, evidence, and services (field investigations) are subjected to quality assurance.

Quality assurance will be done in a timely manner so that corrective action can take place and feedback can be delivered to the people or person responsible.

4.3 Quality Assurance: Investigations Section

- 4.3.1** All investigator reports will be reviewed by the Chief Medical Investigator on a daily basis. In addition the investigative report will be reviewed by the attending pathologist and a case review sheet initiated by the investigator will be completed by the pathologist and given to the Chief Investigator for corrective action as necessary. After review by the Chief investigator the form will be placed in the investigators mail box for their review, correction and response to any questions or comments made by the pathologist or Chief Investigator. The response and corrective action will be returned to the Chief Investigator.
- 4.3.2** All cases to be examined that day in the office will be reviewed at the 08:00 meeting. This will consist of a review of the scene images as well as a discussion of the scene and circumstances as collected and described in the investigator's report. Feedback will be documented on the investigator report review sheet. The response and corrective action will be returned to the Chief Investigator.
- 4.3.3** All No Jurisdiction Assumed (NJA) cases will be printed out from the previous day and reviewed by the pathologists and the Chief Investigator at the 08:00 meeting.
- 4.3.4** Any questions or concerns will be directed to the Chief Investigator for corrective action.
- 4.3.5** A list of the bodies being held at the office will be printed out daily. The status of each case will be indicated on the form and the cases will be reviewed at the 08:00 meeting.

4.4 Quality Assurance: Pathology Section

- 4.4.1** Pathology photographs will be reviewed for quality and adequacy of documentation daily or the next day as time permits at the 14:00 meeting. The images will be discussed and corrective action will be taken when necessary. Pathologic and anatomic findings cause and manner of death from the cases examined that day will be discussed.
- 4.4.2** All homicide autopsy reports will be reviewed by the other pathologist in the office prior to their release to the family or other agencies outside the office. Corrections or errors will be marked on the report for review by the originating pathologist. Corrective action will be documented on the review form and the forms will be filed in a three ring binder.
- 4.4.3** Death Certificates and outstanding reports will be reviewed on a weekly basis. An outstanding autopsy report list will be generated and reviewed along with the death certificates for the week.
- 4.4.4** The Snohomish County Medical Examiner's Office participates in Child Death review. At least one representative from the office (usually a pathologist) attends the meeting and presents pertinent information about the deaths.
- 4.4.5** A status report consisting of a list and status of all cases brought into the office will be generated once a week. This list includes unfinished and overdue reports. This list will be reviewed once a week by the Chief Medical Examiner, the Associate Medical Examiner, the Chief Investigator and the Operations Manager.
- 4.4.6** On a quarterly basis, 5 autopsy cases examined by each pathologist will be randomly selected and reviewed by the other pathologist. This review will include a review of the investigative file, photographs, slides and the autopsy report. An autopsy review form will be completed on each case. Corrective action to any deficiencies will be documented on the review form. The review forms will be filed in a three ring binder.

4.5 Quality Assurance Monitoring

- 4.5.1** This list includes transcription completions, toxicology requests and reports received, unfinished and overdue reports, and pending report requests. This list will be reviewed once a week by the Chief Medical Examiner, the Associate Medical Examiner, the Chief Investigator and the Operations Manager to assure performance to standard.

SECTION 5.0

Support Services and Consultants

5.1 Laboratory Services

- 5.1.1 Laboratory services for toxicology, fingerprinting, serology, DNA testing, ballistics, tool marks, and trace evidence are available through the Washington State Crime Laboratory. The crime lab is accredited by the American Society of Crime Laboratory Directors- Laboratory Accreditation Board.
- 5.1.2 Microbiology laboratory services are performed by Providence Medical Center Laboratories (PacLab) and the Washington State Public Health Department Microbiology Laboratory. Providence is accredited by the College of American Pathologists (CAP). The State Microbiology Laboratory is accredited by the College of American Pathologists (CAP).
- 5.1.3 Clinical chemistry is performed by Harborview Medical Center or by the Washington State Toxicology Lab. Harborview is accredited by the College of American Pathologists (CAP).. Infant metabolic screening is performed by Perkin- Elmer laboratories. Perkin- Elmer laboratories are accredited by the College of American Pathologists
- 5.1.4 Histology services are provided by Cellnetix Laboratory, which is accredited by the College of American Pathologists (CAP).

5.2 Consultants

- 5.2.1 Reliable, complete, reputable and credible expert consultation in neuropathology; forensic odontology; forensic anthropology; and radiology is available to the office. The consultants are all formally trained in their respective fields.

List of Consultants:

Forensic Odontologist: As out lined in other areas of this manual a forensic odontologist will be contacted for bite mark analysis and for examination of dental records for the purpose of making decedent identification. The examination is performed at the office. The report generated by the consultant will be incorporated into the case file.

Gary Bell, DDS, DABFO
Stephanie Kavanaugh, DMD, DABFO

Forensic Anthropology: A forensic anthropologist will be contacted to examine skeletal remains including cases of unidentified remains, skeletal

remains associated with suspicious circumstances or where the investigation indicates homicide. The examination is performed at the office. The report generated by the consultant will be incorporated into the case file.

Kathy Taylor, Ph. D.

Neuropathology: On occasion and at the discretion of the forensic pathologist a brain will be retained for examination and consultation with a Neuropathologist. This often occurs in child abuse cases but may occur with any death where further examination would assist the forensic pathologist in determining the cause and manner of death. Chain of custody will be maintained on any specimens leaving the office. The neuropathology report will be included in the case file.

Steve Rostad, M.D., board certified in Anatomic Pathology and Neuropathology

Pediatric Pathology: A pediatric pathologist will be consulted when at the forensic pathologists discretion additional examination and consultation would assist in determining the cause and manner of death. Chain of custody will be maintained on any specimens leaving the office. Any reports generated by the consultant will be incorporated into the case file.

Joe C. Rutledge, M.D., board certified in Pediatric Pathology
Raj P. Kapur, M.D., board certified in Pediatric Pathology

Radiology: At the forensic pathologist's discretion an X-ray image can be sent for additional examination and interpretation. When a request is made the interpretation will be made by a Board- Certified Radiologist. The report generated by the consultant will be incorporated into the case file.

Harborview Medical Center, Department of Radiology

- 5.2.2** The office has access to legal advice through the civil division of the Snohomish County Prosecutor's office. Legal opinions and advice from the Prosecutors office is maintained for reference.
- 5.2.3** Laboratory tests and consultants reports are incorporated into the case file whenever they are performed. Pertinent information is recorded in METS.

SECTION 6.0

Inquest

6.1 Policy

The Snohomish County Medical Examiner's Office is charged by Snohomish County Code (SCC) [2.74](#) with all the duties of the Coroner as described by state statutes, including conducting inquests. The purpose of an inquest is to determine the cause and manner of death. The determination of whether or not to hold an inquest is made at the discretion of the medical examiner. The medical examiner may hold an inquest when, after review of the information surrounding the death, the medical examiner is unable to determine the cause and manner of death with reasonable medical probability, and when he or she determines that sworn statements of witnesses before a jury of inquest may provide additional information for the purpose of determining cause and manner of death that is otherwise unavailable.

- 6.1.1** If the medical examiner determines that an inquest shall be held, the medical examiner shall select a hearing examiner to conduct the inquest according to the Snohomish County Medical Examiner Inquest Procedural Rules.
- 6.1.2** Subject to the availability of the hearing examiner and the reports from the investigating agencies, the medical examiner will attempt to schedule the inquest no later than sixty days from the date of the decision to conduct an inquest.
- 6.1.3** The medical examiner may grant exceptions to the Inquest Rules where there are exceptional circumstances and/or the public interest is served by variance from the rules. The medical examiner may amend or modify the Inquest Rules at his or her discretion.

6.2 Inquest Procedural Rules

Pursuant to RCW [36.24](#) and SCC [2.74](#) an inquest into the death of a person shall be held at the sole discretion of the Snohomish County Medical Examiner.

6.2.1 Designation and duties of hearing examiner

The medical examiner will select a hearing examiner to preside over the inquest. The hearing examiner shall be an attorney licensed to practice law in the State of Washington. The hearing examiner will serve at the pleasure of the medical examiner and shall conduct the inquest according to these Inquest Procedural Rules.

6.2.2 Location of Inquest

The inquest proceedings shall be conducted at such location as designated by the medical examiner.

6.2.3 Conduct of Proceedings

The Snohomish County Prosecuting Attorney shall be notified in advance of any inquest to be held and at his or her discretion may be present and serve as an independent assistant to the medical examiner.

6.2.3.1 The medical examiner may request that the prosecuting attorney or his or her designee assist as follows:

- a. Consult with the medical examiner regarding the presentation of all witnesses and evidence.
- b. Consult with the medical examiner in the preparation of jury instructions and interrogatories to the jury.
- c. Present evidence at the inquest.

6.2.3.2 The medical examiner may adjourn the inquest from time to time as he or she may deem necessary.

6.2.4 Opening statements/Closing Arguments

There shall be no opening statements or closing arguments.

6.2.5 Rules of Evidence

The Superior Court rules of evidence shall apply. Photostatic copies of documents shall be used during the inquest. Original documents shall be maintained by the appropriate agency.

6.2.6 Media Guidelines

Electronic media participation, television cameras and tape recorders shall not be permitted in the hearing room.

6.2.7 Additional Attorney Participation

An attorney representing the person involved in the death and an attorney representing the family of the deceased may be present throughout the proceeding for the sole purpose of observing the proceedings. They shall not participate in jury selection, examination of witnesses, presentation of evidence, or preparation of interrogatories or instructions.

6.2.8 Pre-inquest Conference

Prior to the inquest, the hearing examiner, prosecuting attorney, medical examiner, attorney representing the family of the deceased and the attorney representing the person or persons involved in the death, shall meet to review the evidence and issues that the prosecuting attorney intends to present at the hearing. The prosecuting attorney, as an independent assistant to the medical examiner, may receive comments and objections from the attorneys representing the family or the person involved in the death and may make such modifications, additions or deletions to the presentation as in the prosecutor's discretion is appropriate after consultation with the medical examiner.

6.2.9 Jury Selection

Inquest jurors shall be selected from the regular Superior Court juror pool. Juror questioning shall be done by the hearing examiner from questions submitted by the medical examiner or prosecuting attorney, in his or her capacity as an independent assistant to the medical examiner. Jurors shall be excused by the hearing examiner upon the request of the medical examiner or prosecuting attorney, in his or her capacity as an independent assistant to the medical examiner. There shall be no set limit to the number of jurors who may be excused by the hearing examiner. The inquest jury shall consist of 6 jurors.

6.2.10 Recording

The inquest proceedings shall be recorded electronically. If the attorney for the family of the deceased or the attorney for the person involved in the death desires to have a court reporter, he or she may provide for one at his or her sole expense.

6.2.11 Jury Interrogatories

At the conclusion of the evidence, the jury will be provided with written questions regarding the facts of the death. Questions will not deal with questions of law, policy or recommendations. The questions will be decided on a more probable than not basis. The jury foreperson shall record on the written question the number of jurors responding "yes/no" to each question. When the jury has completed the interrogatories, the interrogatories will be returned to the hearing examiner who will publish the answers and discharge the jury. The hearing examiner shall deliver the interrogatories to the medical examiner.

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